LOBBYING SUPPLEMENTAL REGISTRATION FORM To be used for changes to registrations and terminations. Instructions FOR OFFICE USE ONLY Print in ink or type. Postmark Date: 04120164 Complete form and return to Board of Ethics, 2415 Quail Dr., 3" Floor, Baton Rouge LA 70808, (225) 763-8777 or (800) 842-6630. No fee is required. This form must be submitted within 5 days of any changes in your registration form, to add employers or those you represent, or if you couse all activities requiring registration. It must be submitted within 10 days of any terminations of employment or representations. 1040656 2. BUSINESS PHONE 3. BUSINESS ADDRESS MAILING ADDRESS State Zip 4. EMPLOYER 5. EMPLOYER'S ADDRESS City State ZIP 6. Have you created or terminated all lobbying activities requiring registration? Yes_____ 7. LIST BELOW (a) Names of persons, groups, or organizations which you are adding or eliminating; (b) the address of each such person, group, or organization listed; (c) the type of business each is engaged in or the purpose or function of the organization or group; (d) whether or not the client or someone else pays you to labby; and (e) the date of termination if applicable. Business or purpose

New Representation

If No, who pays you?

Does this person pay you?

Terminated Representation as of_

SUPPLEMENTAL REGISTRATION FORM



2.	Name
	Address
	Business or purpose
	New Representation Does this person pay you?
	If No, who pays you?
	Terminated Representation as of
	Name
	Address
	Business of purpose
	New Representation Dose this person pay you?
	If No, who pays you?
	Terminated Representation as of

CERTIFICATION OF ACCURACY

I hereby certify that the information contained herein is true and correct to the best of my knowledge, information, and belief, and that no information required by the Lobbytst Disclosure Act [LSA-R.S. 24:50 et seq.] has been deliberately omitted.

Signature of Lobbyist

Ferm 501. Rev. 10/2002